

SEMINOLE COUNTY
APPLICATION & AFFIDAVIT

Ownership Disclosure Form

The owner of the real property associated with this application is a (check one)

- ☐ Individual ☐ Corporation ☐ Land Trust
☐ Limited Liability Company ☐ Partnership
☐ Other (describe): _____

1. List all **natural persons** who have an ownership interest in the property, which is the subject matter of this petition, by name and address.

| NAME | ADDRESS | PHONE NUMBER |
|------|---------|--------------|
| | | |
| | | |
| | | |

(Use additional sheets for more space.)

2. For each **corporation**, list the name, address, and title of each officer; the name and address of each director of the corporation; and the name and address of each shareholder who owns two percent (2%) or more of the stock of the corporation. Shareholders need not be disclosed if a corporation's stock are traded publicly on any national stock exchange.

| NAME | TITLE OR OFFICE | ADDRESS | % OF INTEREST |
|------|-----------------|---------|---------------|
| | | | |
| | | | |
| | | | |

(Use additional sheets for more space.)

3. In the case of a **trust**, list the name and address of each trustee and the name and address of the beneficiaries of the trust and the percentage of interest of each beneficiary. If any trustee or beneficiary of a trust is a corporation, please provide the information required in paragraph 2 above.

Trust Name: _____

| NAME | TRUSTEE OR BENEFICIARY | ADDRESS | % OF INTEREST |
|------|------------------------|---------|---------------|
| | | | |
| | | | |
| | | | |

(Use additional sheets for more space.)

4. For **partnerships**, including limited partnerships, list the name and address of each principal in the partnership, including general or limited partners. If any partner is a corporation, please provide the information required in paragraph 2 above.

| NAME | ADDRESS | % OF INTEREST |
|------|---------|---------------|
| | | |
| | | |
| | | |

(Use additional sheets for more space.)

5. For each **limited liability company**, list the name, address, and title of each manager or managing member; and the name and address of each additional member with two percent (2%) or more membership interest. If any member with two percent (2%) or more membership interest, manager, or managing member is a corporation, trust or partnership, please provide the information required in paragraphs 2, 3 and/or 4 above.

Name of LLC: _____

| NAME | TITLE | ADDRESS | % OF INTEREST |
|------|-------|---------|---------------|
| | | | |
| | | | |
| | | | |

(Use additional sheets for more space.)

6. In the circumstances of a **contract for purchase**, list the name and address of each contract purchaser. If the purchaser is a corporation, trust, partnership, or LLC, provide the information required for those entities in paragraphs 2, 3, 4 and/or 5 above.

Name of Purchaser: _____

| NAME | ADDRESS | % OF INTEREST |
|------|---------|---------------|
| | | |
| | | |
| | | |

Date of Contract: _____

Please specify any contingency clause related to the outcome of the consideration of the application.

6. As to any type of owner referred to above, a change of ownership occurring subsequent to this application, shall be disclosed in writing to the Planning and Development Director prior to the date of the public hearing on the application.
7. I affirm that the above representations are true and are based upon my personal knowledge and belief after all reasonable inquiry. I understand that any failure to make mandated disclosures is grounds for the subject rezoning, future land use amendment, special exception, or variance involved with this Application to become void. I certify that I am legally authorized to execute this Application and Affidavit and to bind the Applicant to the disclosures herein.

Date

Owner, Agent, Applicant Signature

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by _____, on this ____ day
of _____, 20____. Owner, Agent, Applicant Name

Signature of Notary Public

Print, Type or Stamp Name of Notary Public

Personally Known _____ OR Produced Identification _____

Type of Identification Produced _____